



PART B - FEE(S) TRANSMITTAL

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7590

05/19/2003

~~Dan R. Christen~~
Conley, Rose, & Tayon, P.C.
P.O. Box 398
Austin, TX 78767

Jeffrey C. Hood
M H K K + G

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Jeffrey C. Hood	(Depositor's name)
<i>Jeffrey C. Hood</i>	(Signature)
7/10/2003	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/759,597	01/11/2001	Henry Sowizral	5181-45501	9430

TITLE OF INVENTION: CREATING A PARALLEL STRUCTURE FOR SCENE-BASED RENDERING

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1300	\$300	\$1600	08/19/2003

EXAMINER	ART UNIT	CLASS-SUBCLASS
VO, CLIFF N	2671	345-420000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Meyertons Hood Kivlin Kowert
& Goetzel, P.C.

1 _____

2 Jeffrey C. Hood

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Sun Microsystems, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Santa Clara, CA

Please check the appropriate assignee category or categories (will not be printed on the patent)

☐ individual ☒ corporation or other private group entity ☐ government

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☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☐ The Commissioner is hereby authorized by charge the required fee(s), or credit any overpayment, to deposit Account Number 501505/5181-45501/JCH (Fee auth. encl.)

Commissioner for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature)

Jeffrey C. Hood

(Date)

Jeffrey C. Hood, PTO # 35,198

7/10/2003

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